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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/509,502
Filing Date	Sept. 28, 2004
First Named Inventor	ASCHER, et al
Art Unit	
Examiner Name	
Attorney Docket Number	32413A

To: Commissioner fo P.O. Box 1450 Alexandria, VA 22										
Please withdraw me	as attorney or agent for the above ic	dentified	patent ar	pplicatio	on, and	1				
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Signature	In Thallens									
Name John D. Thaifer	me John D. Thatemer			Registration No. 3			34,940	34,940		
Date	Feb 28, 2007			<u> </u>	Telephone No. (609) 627 8507					
NOTE: Withdrawal is effective w	when approved rather than when received. Unle	ess there a	re at least 3 normally d	30 days bu lisapprove	etween a	approva	I of withdi	rawal and the expiration		

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